

1998 National Student Loan Data Systems Training Schedule

<i>Regional Location</i>	<i>Training Date</i>	<i>Training Contact</i>
Region I- <i>MA,ME,NH,RI,CT</i> 10 Causeway Street Third Floor, Room 343 Boston, MA 02222	August 10-11 September 8-9 October 1-2 October 14-15	Adam Berg 617-565-8642 617-565-8636 <i>Fax</i> adam_berg@ed.gov
Region II <i>NY,NJ,PR,VI</i> 75 Park Place 12th Floor New York, NY 10007	September 1-2 September 14-15 September 28-29 October 5-6	Byron Belser 212-264-8012 212-264-1666 <i>Fax</i> byron_belser@ed.gov
Region III <i>PA,MD,VA,WV,DE,DC</i> The Wanamaker Building 100 Penn Square East Suite 513 Philadelphia, PA 19107	September 16-17 October 7-8 October 22-23	Janice Stribling 215-656-5929 215-565-5964 <i>Fax</i> janice_stribling@ed.gov
Headquarters-One Session 7th & D Streets, S.W. ROB-3, Room 4009 Washington, D.C. 20202	August 17-18	Pennie Summers 202-401-8422 202-260-5178 <i>Fax</i> penny_morris-summers@ed.gov
Region IV <i>GA,FL, AL,MS,TN,KY,SC,NC</i> 61 Forsyth Street, SW 18th Floor Atlanta, GA 30303	August 24-25 September 10-11 October 13-14 October 19-20	Keisha Berkley 404-562-6264 404-562-6283 <i>Fax</i> keisha_berkley@ed.gov

<i>Regional Location</i>	<i>Training Date</i>	<i>Training Contact</i>
Region V <i>IL,WI,MI,IN,OH</i> 111 North Canal Street Room 1030 Chicago, IL 60606	August 27-28 September 23-24 October 15-16	Steven Jakymec 312-886-8766 312-886-6737 <i>Fax</i> steven_jakymec@ed.gov
Region VI <i>TX,OK,LA,AR,NM</i> 1999 Bryan Street Suite 2735 Dallas, TX 75201	August 26-27 September 3-4 October 13-14 October 26-27	Sue Goldman 214-880-2405 214-880-2402 <i>Fax</i> sue_goldman@ed.gov
Region VII <i>MO,KS,NE,IA</i> 7505 Tiffany Springs Parkway Suite 500 Kansas City, MO 64153	August 31-September 1 September 24-25 October 21-22	Katherine Coates 816-880-4090 816-891-8713 <i>Fax</i> katherine_coates@ed.gov
Region VIII <i>CO,WY,MT,UT,SD,ND,MN</i> 1391 N. Speer Boulevard Suite 800 Denver, CO 80204	August 13-14 September 1-2 September 15-16 October 29-30	Devin Croft 303-844-3677 <i>extension 125</i> 303-844-5756 <i>Fax</i> devin_croft@ed.gov
Region IX <i>CA,AZ,HI,NV</i> 50 United Nations Plaza Room 137 San Francisco, CA 94102	August 11-12 September 3-4 October 20-21 October 28-29	Terri Tom 415-437-8845 415-437-8852 <i>Fax</i> terri_tom@ed.gov
Region X <i>WA,OR,ID,AK</i> 1000 Second Avenue Suite 1200 Seattle, WA 98104	August 25-26 September 2-3 September 17-18 October 6-7	Kimberly Schreck 206-287-9840 206-553-0800 <i>Fax</i> Kimberly_R._Schreck@ed.gov

NATIONAL STUDENT LOAN DATA SYSTEM TRAINING

TRAINING REGISTRATION

Date: _____

Participant's Name and Title:

____ Financial Aid Administrator ____ Owner ____ President
____ Vice President ____ Fiscal Officer ____ Other: _____

Phone #: _____ FAX #: _____

Contact Person:

(If other than participant)

INSTITUTION NAME: _____ OPE ID #: _____

ADDRESS:

CITY, STATE, ZIP:

Class Title:

LOCATION AND DATE SELECTION		
PREFERENCE	LOCATION	DATE
1st Choice		
2nd Choice		
3rd Choice		

- A separate **Registration Form** must be completed for each attendee.
- Please **type or print**, when completing this form.
- The Registration request **must be received at least three days before the session.**
- Registration requests will be scheduled in the order of receipt.
- **If you have questions or need to cancel/ reschedule**, call the contact at the site where you are interested in attending training.
- Send **Registration Form** to the contact at the site you plan to attend.

If you are in need of special accommodations/services during the training, please explain below:

